

**REVOCATION OF POWER OF
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Application Number	10/785,600
Filing Date	February 23, 2004
First Named Inventor	Bruce W. Kneller
Art Unit	1617
Examiner Name	BADIO, BARBARA P.
Attorney Docket Number	BKLN-001-101

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 75436

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

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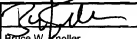
OR

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I am the:

- ☒ Applicant/Inventor.
- ☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	
Name	Bruce W. Kneller
Date	25-FEB-2008

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

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